

## HOMŒOPATHY NOT "THE LAW OF HEALING."

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I had the honour of receiving the following note from Sir Benjamin Brodie, a short time ago, in reference to my paper, which appeared in a late number of the *London Medical Review*, touching Homœopathy.

"April 22nd, 1862.

"My dear Sir,

"I thank you for your letter, and for the opportunity of reading your paper. I agree with you in all that you have said; at the same time I confess that it seems to me that the surest way of exposing the real nature of homœopathy is to refer to the treatises on the subject.

"Yours very truly,

"DR. SPURGIN."

"B. C. BRODIE.

Adopting the above reference, and encouraged by the above approval of my paper, which emanated from my views regarding homœopathy, and the treatises upon it, as a system springing from a false principle, proceeding in a wrong direction, and ending in erroneous conclusions, it remains for me to explain to Dr. Sharp that, like himself and William Harvey, I "claim that liberty, which I willingly yield to others, to put forward as true such things as appear to be probable, until proved to be manifestly false;" and this without the qualification of "a permission in subjects of difficulty," as ascribed to the great Harvey.

For myself, I feel no difficulty whatever in perceiving the fallacy of the principles—homœopathic, it being as easy to do so, as it is to perceive (using Dr. Sharp's own words) that "two and two make four," despite all the persuasion that their disciples would exercise to influence my judgment in common with that of the multitude.

Dr. Sharp asks, "Is there a law of healing?" and makes the question the subject of an article, which appeared in this journal last month. In this article Dr. Sharp has several times introduced passages from my paper, above adverted to, replying to his observations on homœopathy, in a way that demands my notice and comment. The way in which he has introduced such passages will appear in the course of the following comment upon his question and manner of dealing with it. In searching for an answer to his own question, I can only discover that there is "the method" of Hahnemann and of those

who follow him, and there is also "a modification" of that method which Dr. Sharp himself has been "induced to adopt and to recommend."—(see p. 514.) The method referred to is left to the essayings of the reader, though he must identify it with the "law of healing." But can a modification of "Hahnemann's method," and of that of those who follow him, be essayed without an innovation upon his law? or upon his authority?

Dr. Sharp, of course, has found reason to stray from the method, with art to modify it as well. Hahnemann's method is, therefore, to be trusted to no longer; but on "practical" grounds, Dr. Sharp recommends his readers to adopt his method. On the very same grounds did Hahnemann recommend his method; though Dr. Sharp states his "motive to be that of serving his profession, by shewing how all the real and substantial advantages of the so-called homœopathic treatment may be adopted in general practice without dereliction of duty or compromise of character."

Let us suppose this method of Dr. Sharp's to be merging into general practice on his recommendation, and let us suppose the adoption of it to be general; what is there to assure the general practitioner that Dr. Sharp will not find reason for another modification of "the method," to say nothing of "a law of healing." Dr. Sharp must first determine his method to be according to a given law of healing, especially as he has determined to modify Hahnemann's method, even though this method is founded upon Hahnemann's law. The general practitioner will, after all, have but to ask the question, which is the best method of healing—Hahnemann's or Sharp's?

But general practice proceeds upon the principle of there being many "methods" of healing, as well as many "laws of healing;" and it therefore regards all attempts at single methods, and single laws, to be but so many modifications of an attempt to cure everything by one remedy, or according to one law; an attempt equally futile for both, equally requiring assertion, equally arbitrary, and equally inadequate to every emergency.

One of the laws well known to the general practitioner in medicine is that many diseases will "recover of themselves," in other words, that they so heal; and it is to this law that I have referred the recoveries from sickness that are ascribed to homœopathic practice; a reference by no means pleasing to Dr. Sharp, though I will defy him to *disprove* it by all the "*provings*" of homœopathy.

Healing laws are only to be found in the animal economy itself; they can, assuredly, be assisted by a judicious recourse to a *materia medica* of world-wide abundance and variety; these laws, however, are independent of *provings* by or with drugs. Healing processes were going on before our drugs were known; it has therefore been the study of general practitioners in medicine to aid, not to add to, these laws of healing, whether they are at work in this constitution or that, in this organ or that, in this period or that, by every possible, probable, and reasonable method that art can devise or experience suggest.

When drugs are used to this end, no lack of consideration has

been witnessed as to the point "how they may be most safely as well as most efficaciously administered."

Dr. Sharp is by no means the first in this field of investigation ; his three cases which he has appended to his paper of enquiry, "whether there is a law of healing?" subject him, as he says, "to the evil of adverse criticism"—to an evil that will be "more than compensated for by the good of supplying information to those who will value it." But his three cases are no more than instances of self-recovery irrespective of drugs, which were administered in infinitesimal doses that could not invalidate the law of self-recovery. I say, could not, for according to unbiased experience which comes even within the range of the wonders of idiosyncrasy, inappreciable quantities of poisonous drugs, and therefore imaginary qualities of them may be thought of, to constitute an imaginary influence and a fictitious or apparent cause for a real and positive phenomenon.

Dr. Sharp's three cases have given me no information that I can conscientiously rely upon for the treatment of the like that may come under my notice. I therefore unhesitatingly avow my impression that they could have been cured, according to the common acceptation of the process, in less than half the time by the administration of a few well-timed doses of Epsom salts and gum Arabic.

In stating this, my impression, I am not guilty of an evil adversary's action in the shape of adverse criticism upon the three cases, but I feel "I am supplying good information to the best of my ability," whether "others" will "value it" or not.

With regard to criticism, however adverse it may appear, I certainly was reminded of the force of Sir Benjamin Brodie's remark in his note to me, while perusing Dr. Sharp's history of his "three cases," "that it is the surest way of exposing the real nature of homœopathy to refer to the treatises on the subject."

Dr. Sharp refers to three fatal cases, as instanced by myself—and this in contrast with his recovering ones; of course he intended this action as a dead set against my practice, and I am obliged to him for the "evil of his adverse criticism" upon the fatal cases he would assign to me, it being a good opportunity to my hand for explaining the grounds of my mistrust in, and opposition to homœopathy in, and under, its every aspect.

The three fatal cases Dr. S. would assign to me are not assignable to me in fact. Dr. S. is therefore open to the charge of three false applications of my statements. I will repeat my statements, to substantiate what I say:—"I have seen pleurisy as characterised by excitement and a good-coloured rash; and the latter state confirmed after death:" this is one of the cases assigned to me. Again, "I have seen a patient who has been treated homœopathically for pleurisy, and was supposed to be cured by it, who died two years afterwards, very suddenly, of sheer prostration, to be at once accounted for by the condition of the pleura and pericardium which were adherent, surface to surface, by reason of old (that is to say, of long standing) inflammation and its homœopathic treat-



ment." In reference to this case, Dr. Sharp remarks, as also in reference to another chest case, *ut supra*, and to one of affection of the brain, "all appeared to have died in his hands, though whether he proscribed for them or not he leaves doubtful." If doubtful, why did Dr. S. say that all appeared to have died in my hands, when I adduced them as instances only where cure was possible and even probable under judicious treatment, and when they did not even appear to do so.

Dr. Sharp's references to the father of English physicians, to the words of Sydenham, or to the "admirable Matthew Baillie," are not to the point in question; they are stated but not quoted, if they were quoted I might restore them perhaps to their real and correct bearing, and also to their proper application, or if I could not my argument would lose none of its force nor seriousness.

Again, Dr. Sharp refers to my "honest" statement of there being "no such things as specifics." He then deals with my meaning thus—"no drugs appropriated to the cure of particular distempers! no drugs whose operation we cannot account for." The two latter sentences are not my meaning, nor are they approaching to it, therefore I am not thus "condemning my friends;" nor has Dr. Sharp to thank me for taking his side as to the "frequent failure of quinine, iron, &c., in their respective departments;" nor has he any authority to ascribe to me an idea even of the "frequent" failure of these remedies, nor "of their respective departments." My ideas and words on these points being, in fact, that they frequently succeed, and that their effects are often beneficial in many disorders, without assigning to them the special departments of any arbitrary system of therapeutics.

Personally, I am indifferent to the groundless accusations of Dr. Sharp, whilst I deem adverse criticism a good thing when it demonstrates any error in principle or practice. At the same time I feel entitled to speak zealously on any subject, the error of which is patent to me, provided I keep clear of the personal misapplications that convey erroneous impressions concerning either the principles, or qualifications, or conduct of others.

Dr. Sharp accuses me of "endeavouring to disparage all his statements by setting them down as assertions," and this in a "somewhat contemptuous manner." If my conduct savours in the smallest degree of contempt I am extremely sorry at having expressed myself in a manner so contrary to what I feel towards every person, even should he be so ignorant of "the meaning of words" as to require a reference to "Johnson's Dictionary," as Dr. Sharp has referred myself twice over.

If Dr. Sharp asserts that two and two make four, I assent to his assertion, not upon his authority, but upon that of arithmetical truth. The assertion is not a bare one, for it has a connection with all the truths of mathematical philosophy to render it the very opposite of a bare "assertion." Dr. Sharp's assertions, on the contrary, are so supported by other assertions, by misapplication of facts, and by erroneous conclusions, that they never can come within the sphere of universal perception, as is possible with

such as are arithmetical, mathematical, and philosophical. It was on this ground that I assured Dr. Sharp that all physicians (whether born or unborn, *living* or to come) would "never adopt his reasoning nor his conclusions 'eventually.'" I spoke of the future advisedly, and I still say so, as well in the face of his assertion that they would do so, as with reference more to the future than to the *living* community of doctors.

To Dr. Sharp's authority I cannot defer in support of his assertions; I demur to all the supports he derives for his assertions from all other sources, whether experimental or philosophical, for I cannot overlook their misapplication, their want of connection, and their lack of sound consistency.

The disparagement, therefore, of Dr. Sharp's statements by my designating them as so many assertions, springs not from my ignorance of the meaning of the word "assertion," but from my want of perception of their importance to this or to succeeding generations. I believe, moreover, that the perception of their being valueless to the interests of rational pathology and sound therapeutical knowledge alike is steadily advancing, notwithstanding the workings of busy persuasion on the one hand, and the seekings of fanciful proclivity on the other.

The other word, for the meaning of which Dr. Sharp "somewhat contemptuously" referred me to "Johnson," namely, *specifics*, is, precisely according to my understanding of it, "drugs appropriated to the cure of some particular distemper." If Dr. Johnson had been as good a physician as he was a philologist, he would have testified, as I have done, to the fact that, "honestly speaking, there are no such things as specifics?" for "they are exactly so many manifestations of quackery." To say that drugs are appropriated to the cure of multifarious distempers, is to speak the truth closely to experience and pertinently to facts. Only consider the advertised drugs of this day, each of which, instead of being appropriated to the cure of some particular distemper, is puffed up as appropriated to the cure of Pandora's boxfull at once. Consider the infinitesimal globules of homœopathic pretension, and their application to many "*organs*" by Dr. Sharp, and to many "*symptoms*" by his *confrères*! at once. Does such practice square with Dr. Johnson's definition of the word "*specifics*?" Assuredly I have as much reason for asserting that Dr. Sharp should consult Dr. Johnson, as he has for his assertion that I am ignorant of the "meaning of words."—(p. 519.) Quincy's definition, on the other hand, is more correct if not more authoritative, "a term heretofore much in use for such medicines whose operations could not be accounted for:" a most apt definition, and most appropriate to all advertised drugs and to all infinitely dissolved ones alike, whether sanctioned by a 2½d. stamp or authorized by the impress of Hahnemann.

Well may "good physicians eschew specifics of every kind," (repeating my own language) under such conflicting definitions, seeing that the two definitions together make drugs appropriate to cure by unaccountable operations. Good physicians eschew spe-

cifics, indeed, for the valid reason of their wishing to be honestly accountable for the drugs they administer, and this both as to their qualities and doses, whether they are poisonous or otherwise, to say nothing of their being appropriate to the cure of diseases according to general experience. Good physicians, again, eschew specifics because they can discern how imaginative virtues merely devolve to them of sheer mental idleness and weakness. In their eyes, it is not less idle for the imagination to play its pranks, than it is for a harlequin to cut his capers—the amusement, the profit, the honour, the reputation, are weakness itself, in reality, seeing that no advancement in truth or in valuable knowledge come of either to supplant the fool's paradise or to clear away the world's mountebank. Alas! that gales so favouring should be setting in from certain quarters of human opinion to drift the soul upon the quicksands and sunken rocks of shifting frivolity and stubborn arrogance! Alas! that human faith should be so prone to linger hopefully and wistfully about the EXCRETA of the serpent's digestion—of a digestion so significant of coils, and wiles, and gripes, so productive of poison, in short, for the bane of intellect and will alike, of their soundness of thought and integrity of action severally and together.

When a reviewer asks, as quoted by Dr. Sharp from this Journal, (April number, at page 490,) *What is a fact? What is a fact?* A good physician can answer it, by saying that human weakness “is a fact,” and human arrogance “is a fact,” and that when these *are* admitted to be so, we shall discover a “method of healing, fixed, definite and consummate,” for the satisfaction of men of experience like “Father Sydenham” and the “admirable Baillie.”

As for the “law of healing,” which Dr. Sharp enquires about, I am quite satisfied that a “better method” of using “my” world-wide *Materia Medica* for the benefit of the sick, is open for “further inquiry,” whether such healing refers to bodily ailments alone, or to the mental also that are known by the smart of *some* differences curable only by the *fixed*, the *definite*, and *consummate* laws of the Great Physician for all, who brings a universe of facts to bear upon the interests and well-being of humanity for its *only lawful* imitation universally.

17th May, 1862.